

No 14
Div. 2.
No 4 Sanson

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A Thesis By
Hobson Whitelaw

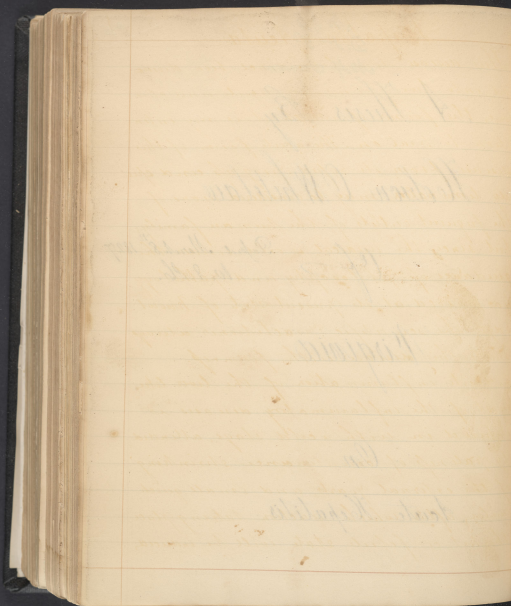
Of

Dated March 8th 1827
W. R. H.

Virginia

On

Acute Hepatitis

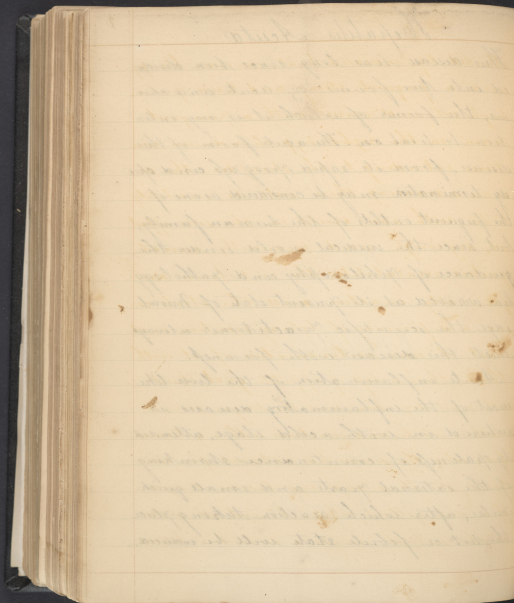


Hepatitis. Acuta.

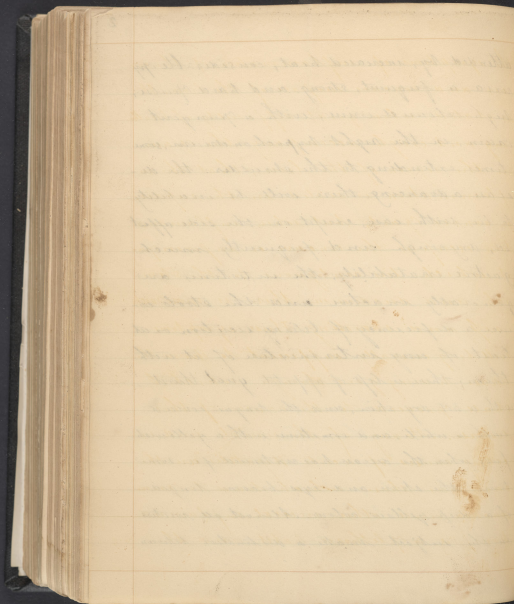
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This disease has long since been divided into two forms: viz. acute and chronic, the former of which it is my intention to treat on. The acute form of this disease, from its rapid progress and speedy termination may be considered as one of the frequent outlets of the human family; but since the medical world under the guidance of philosophy and pathology has arrived at its present state of knowledge, the scientific practitioner always meets this disease with firmness.

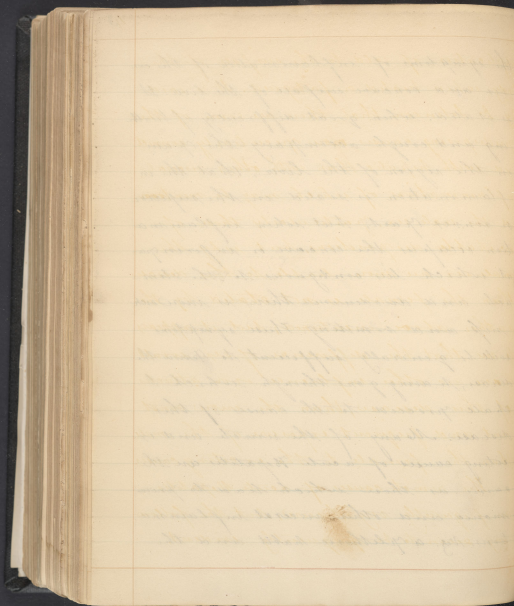
Acute inflammation of the liver like most of the inflammatory diseases is ushered in with a cold stage, attended by paleness of countenance shrinking of the external parts and small quick pulse; after which reaction taking place the hot or febrile state will be induced;



attended by, increased heat, considerable pyrexia, a frequent, strong, and hard pulse, high coloured urine, with a pungent pain, in the right hypochondrium, sometimes extending to the shoulder: the disease advancing, there will be inability to lie with ease, except on the side affected, dry cough and frequently much gastric irritability; the intestines are generally inactive and the stools evince a deficiency of biliary secretion or at least of any intermixture of it with them; there is loss of appetite great thirst with a hot dry skin, and the tongue covered with a white, and sometimes with a yellowish fur; when the disease has continued for some time the skin and eyes become tinged of a deep yellow colour. Almost all writers on the subject make a distinction between



the symptoms of inflammation of the convex and concave surface of the liver. It is stated, when great difficulty of breathing and cough accompany the pain in the region of the liver, that the inflammation is seated in the superior or convex part; but when inflammation occupies the concave or inferior part which lies contiguous to the stomach and duodenum there is more sickness and vomiting. These symptoms will be generally sufficient to shew the disease, having gone through which I shall proceed to the causes of this disease. Many of the remote and exciting causes of acute Hepatitis are the same as those which lead to pneumonia and other visceral inflammations. Viz. a plethoric habit and the

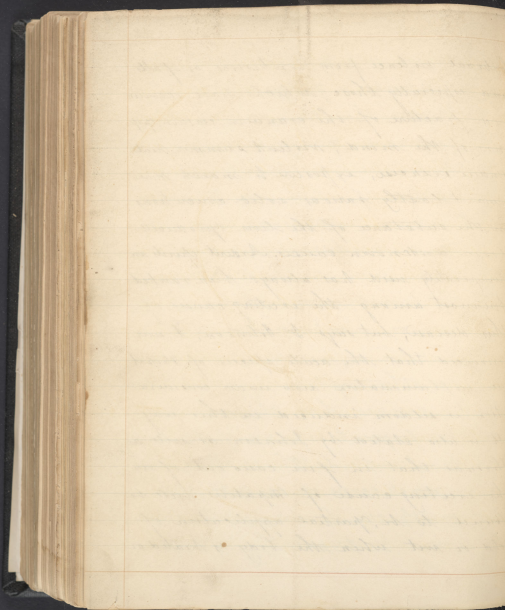


application of cold to the surface of the body when heated or fatigued. It is said by Dr. Solenon that there are some of the predisposing causes more peculiarly connected with hepatic than with other visceral inflammations, of which may be mentioned the male sex, particularly those of irritable dispositions, but why the male sex are more liable to this disease than the female is not stated by the author above mentioned; but it appears to me that the difference of sex would have no other influence over attacks of this disease, than the more constant and frequent exposure of the male than the female to the exciting causes.

The remote causes of acute Hepatitis are frequently very obscure, but the following seem to be frequently evident.

Colossal violence from contusions or falls
and especially those which have occasion-
ed fracture of the cranium, certain opo-
sions of the mind, violent summer heats,
undue exercise, exposure to marsh mias-
ma & lastly various solid concretions
in the substance of the liver produced
from unknown causes. Ardent spirits in-
temperately used has always been ranked
fourth among the exciting causes of
this disease, but says Dr Johnson, I am
convinced that the acute species of Hepat-
ic inflammation now under considera-
tion is seldom induced in this way.

It is also stated by Johnson as well as
Thomas that in five cases out of six
the exciting cause of Hepatitis will be
found to be, partial application of
cold or wet when the body is heated or



over fatigued by violent exercise, in whose opinions I am very much disposed to con-
cur. Of the pathology of this disease
I cannot say much. Dr. Cullen in spea-
king of the pathology of this disease ma-
kes the following observations, It seems prob-
-able says he that acute hepatitis is
always an affection of the external mem-
-brane of the liver and that the chro-
-nic form is an affection of the paren-
-chyma; but it seems to me that
there could not exist inflammation of
the membrane of the liver without
the parenchyma being more or less
affected and vice versa.

Of the Diagnosis. The diseases with
which Hepatitis is most likely to be
confounded are, pneumonia, gastritis
and a spasmodic affection of the

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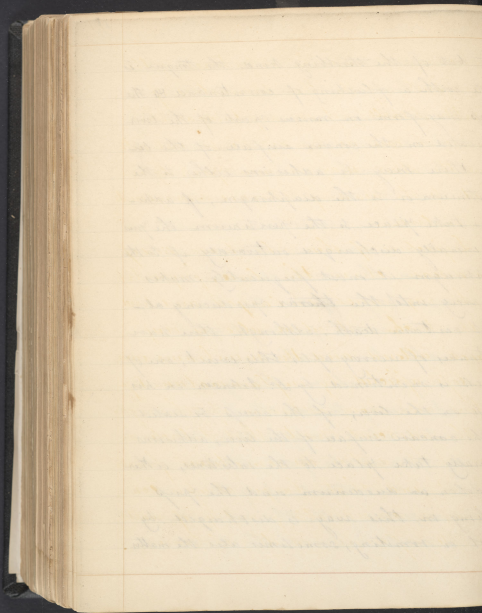
gall ducts. We shall be able to distinguish it from Pneumonia^d by the pain extending to the shoulder in Hepatitis whereas in Pneumonia it is more confined to the chest, by the sallowness of countenance, the cough being unattended by expectoration and by the less degree of dyspnoea. The heat and pain not being increased from taking any thing into the stomach, its being able to retain whatever liquids or medicines are received into it, without the immediate rejection of them and the less prostration of strength, will be sufficient to distinguish it from gastritis. Hepatitis may be distinguished from spasm of the gall ducts, ^{1st} by the absence of nausea, ^{2^d} by the pain being permanent, ^{3^d} by the pulse being very

requent used by the patient always preferring to keep the body in a straight position; whereas the patient will obtain the greatest ease, when there is spasm of the gall ducts, by bending the body forward.

Of the prognosis. The most favourable symptoms in Hepatitis, are, a gradual abatement of the febrile symptoms, an improvement in the complexion, the strength not much reduced, return of appetite &c. whereas, intensity of pain, a full and frequent pulse, great heat, dry skin, costiveness, thirst, and frequent rigours, denote approaching or existing suppuration. Hepatitis like most visceral inflammations may terminate, in resolution, suppuration, abscess or gangrene. Its most frequent

termination, at least in this climate, is
 by resolution, which is frequently attend-
 ed, by discharges or evacuations of differ-
 ent kinds, supposed by many writers to
 be critical, such as hemorrhages from
 the nose or hemorrhoidal vessels, sweat-
 ing, diarrhoea, depositions of sediment
 in the urine and sometimes a serous
 effusion in the cavity of the abdomen
 showing itself under the form of
 ascites. The most frequent of the un-
 favourable terminations of Hepatitis
 is in suppuration, the symptoms
 of a tendency to which, I have stated
 above, but when suppuration has already
 taken place, the fever becomes some-
 what intermittent, frequent rigours
 or shiverings are felt, the sense of weight
 in the part increases, the pain is less

state, but of the throbbing kind, the tongue is
 white with a flushing of countenance &c. The
 abscess may form on various parts of the liver
 & seated on the convex surface of the liver
 &c. there may be adhesions either to the
 peritoneum or to the diaphragm; if adhe-
 sions take place to the peritoneum the pus
 is generally discharged outwardly, if to the
 diaphragm it most frequently makes
 its way into the thorax producing al-
 most certain death, although there have
 instances of recovery after this event, one of
 which is mentioned by Dr. Johnson in his
 work on the liver; if the abscess be seated
 on the concave surface of the liver, adhesions
 generally take place to the intestines, either
 the colon or duodenum and the pus
 passing in this way is discharged by
 stool or vomiting, sometimes also the matter



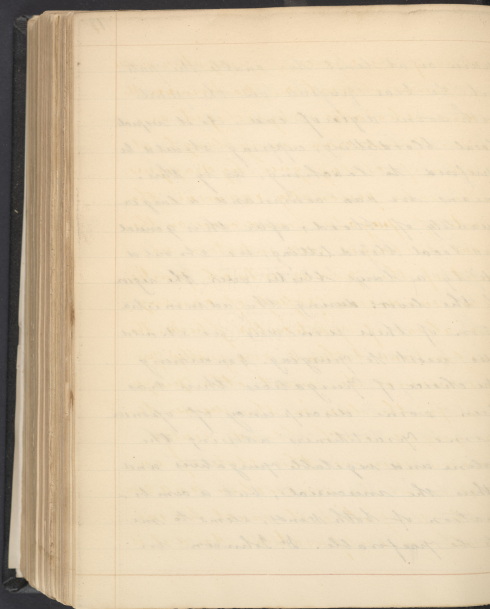
is discharged into the intestines by the biliary ducts. Of the other terminations of Hepatitis I shall not say any thing, as the one is so rare as hardly to be met with and the other may be more properly referred to the head of chronic derangements of the liver.

Dissections of those who have died of this disease show the liver, frequently to be very much enlarged and hard to the touch; its colour also is very much altered and the membranes under a less affected by inflammation. Dissections also show adhesions of this organ to the adjacent parts, that tubercles as well as hydatids are sometimes found in it and that large abscesses containing a considerable quantity of matter are often found in its substance.

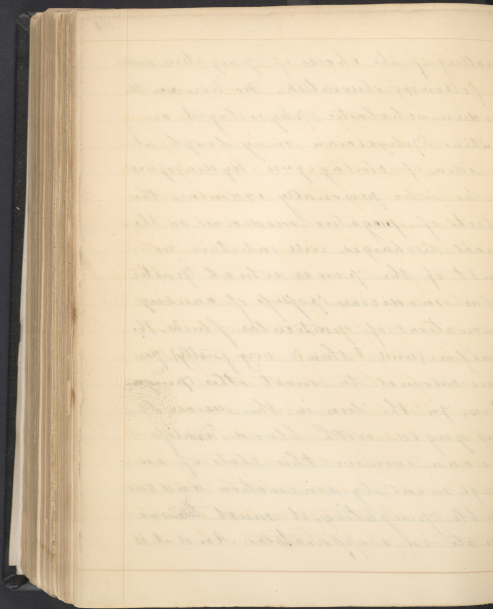
Gallary calculi are now and then found, and it is stated by authors that the liver is sometimes found in a putrid state, resembling very much in appearance a honeycomb, but it appears that tubercles are amongst the most frequent appearances on dissection, the various kinds of which enumerated by Brown, Bailey and others, I shall not enter into a detail of.

Of the treatment, The treatment of acute Hepatitis should always be commenced by copious bleeding both topical and general, purging blistering low diet and every antiphlogistic mean should be strictly enforced. In the beginning of our treatment we should always carry resection far enough to relieve the

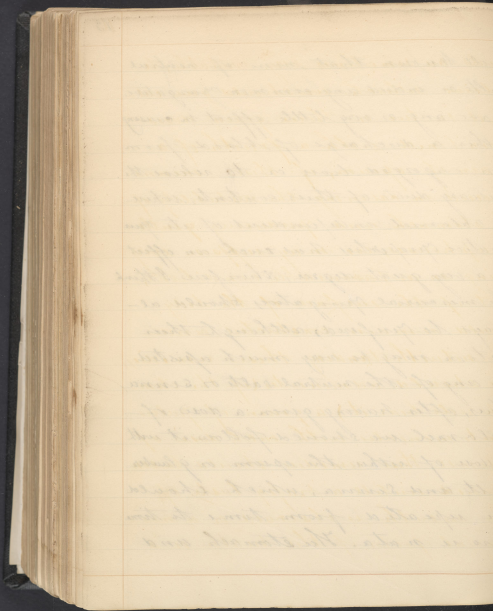
pain or at least to enable the patient to bear pressure on the part with some degree of ease. As it respects local bloodletting, cupping should be preferred to leeching, as by this means we can command a larger quantity of blood, after this general and local bloodletting, we should apply a large blister over the region of the liver; during the administration of these remedies we should also resort to purging. Concerning the choice of purgatives there has been some discrepancy of opinion, some practitioners advising the saline and vegetable purgatives and others the mercurial, but a combination of both kinds, seems to me to be preferable. Dr. Johnson in



squaring of the choice of purgatives makes
the following observation. For however the
modern scholastic physiologist or
vulgar physician may laugh at
the idea, of cholagogues by dragogues
He, he who personally examines the
effects of purgative medicines on the
fecal discharges, will entertain no
doubt of the power which partic-
ular medicines possess of causing
evacuations of particular fluids. He
therefore (and I think very justly) pre-
fers calomel to most other purga-
tives; for the liver in this disease be-
ing gorged with blood, unless
we can remove this state of en-
gorgement by resection and a sui-
table purgative, it must termi-
nate in suppuration. And it is



well known that none of neutral salts or indeed any common purgative have any or very little effect in causing either a discharge of blood from an engorged liver or to relieve the biliary ducts of their contents, whereas calomel independent of its purgative properties has such an effect to a very great degree; therefore I think the mercurial purgatives should always be preferred, although their action may be very much assisted by any of the neutral salts or senna. Thus, after having given a dose of calomel we should follow it with a dose of either the epsom or glauber salt and senna, which should be repeated from time to time *pro re nata*. The stomach and



bowels are sometimes very irritable; to relieve which we should give calomel in two or three grain doses continued with a fourth of a grain of opium, if these means succeed in calming the irritability of the stomach and producing gentle diaphoresis, we may suppose every thing in a favourable condition; but if the surface of the body should remain constricted and very notwithstanding these remedies, we should administer (if the stomach will bear it) a grain of pulvis Antimonialis with each dose of calomel; these remedies should be continued untill a brassy taste of the mouth is observed or a mercurial tinct of the breath or a

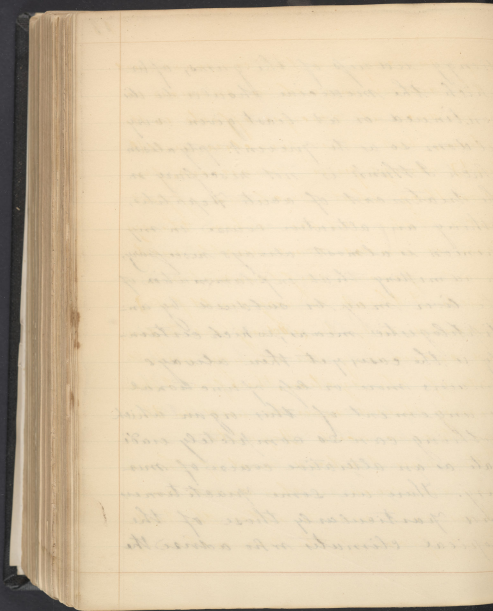
acute Hepatitis, viz. its termination in suppuration; the other terminations of this disease I shall say any thing of, as the one is not to be cured by any remedy and the other may be more properly referred to the chronic form of this disease.

When Hepatitis has not been treated by suitable remedies or has not been attended to in time, it almost always terminates in suppuration, which if we find unavoidable from our not having seen the patient in time, we should endeavour to promote, to effect which we should give Peruvian bark in crachm doses every two or three hours during the day, using at the same time a nutritive diet

with a moderate quantity of wine which course should be continued untill suppuration is completed, after this we should apply a large emollient poultice over the region of the liver, to produce a discharge of matter externally; which should be effected as soon as fluctuation and a pointing of the abscess can be discovered, by an open made externally down to the abscess; if this can not be effected and it ^{should} break internally all we can do is to support the system by tonics a generous diet &c.

Of the diet in this disease, it should be strictly antiphlogistic; allowing the patient sago tapioca rice &c.

spongy redness of the gums; after which the medicine should be discontinued or at least given very seldom so as to prevent opthalmia which I think is not necessary in the treatment of acute Hepatitis, although an alterative course in my opinion is almost always necessary; You admitting that inflammation of the liver may be subdued by antiphlogistic means, which certainly is the case, yet there always remains more or less functional derangement of this organ which nothing can so completely eradicate as an alterative course of surgery. There are some practitioners and particularly those of the tropical climates who advise the



use of mercury in the commencement of the disease in such a manner as to produce its specific effects on the system; but this practice will (I think) always prove pernicious, for admitting that such an effect could take place when the system is under considerable excitement from inflammation (which I think is very doubtful) it would only be adding oil to fire, and increasing the already irritable state of the system; therefore I think mercury should never be used in this way, to cure acute Hepatitis.

Thus have I noticed most of the remedies employed in this disease and I have only now to notice the treatment of one of the terminations of

